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APPLICANTS

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 ** CONTINUING DATA ***** *non*

 ** FOREIGN APPLICATIONS ***** *non*

 IF REQUIRED, FOREIGN FILING LICENSE
 GRANTED ** 10/17/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 4	TOTAL CLAIMS 13	INDEPENDENT CLAIM 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
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Examiner's Signature	/NW/	Initials			

ADDRESS

25453

TITLE

Color saturation adjustment

FILING FEE RECEIVED 834	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit